

L20000257613

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

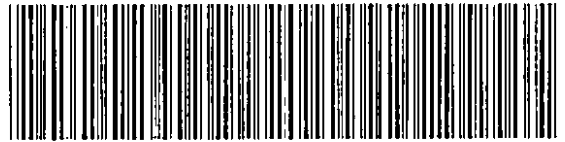
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000351179510

08/31/20--01001--011 \*\*250.00

2020 AUG 28 PM 3:44  
TALLAHASSEE, FL  
SECRETARY OF STATE  
2020 AUG 28 AH10:19

FILED

**CORPORATE  
ACCESS,  
INC.**

*When you need ACCESS to the world*

236 East 6th Avenue, Tallahassee, Florida 32303  
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

**WALK IN**

**PICK UP:** 08/28/2020

- ☐ **CERTIFIED COPY** \_\_\_\_\_
- xx** **PHOTOCOPY** \_\_\_\_\_
- ☐ **CUS** \_\_\_\_\_
- xx** **FILING** LLC \_\_\_\_\_

1. **LINKS BY K & N, LLC**  
(CORPORATE NAME AND DOCUMENT #)
2. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
3. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
4. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
5. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
6. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL  
INSTRUCTIONS:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

---

**LINKS BY K & N, LLC**

THE UNDERSIGNED SUBSCRIBES TO THESE ARTICLES OF ORGANIZATION, EACH A NATURAL PERSON COMPETENT, HEREBY ASSOCIATE THEMSELVES TOGETHER TO FORM A LIMITED LIABILITY COMPANY UNDER THE LAWS OF THE STATE OF FLORIDA.

**ARTICLE I**

THE NAME OF THE ORGANIZATION IS:

**LINKS BY K & N, LLC**

2020 AUG 28 AM 10:19  
SECRETARY OF STATE  
TALLAHASSEE, FL

FILED

**ARTICLE II**

THE GENERAL NATURE OF THE BUSINESS TO BE TRANSACTED BY THIS ORGANIZATION IS AS FOLLOWS: TO CONDUCT BUSINESS IN THE SALES INDUSTRY AND ANY OTHER BUSINESS THAT THE MEMBERS MAY APPROVE FROM TIME TO TIME, HAVE ONE OR MORE OFFICES IN, AND BUY, HOLD, SELL, CONVEY, LEASE OR OTHERWISE DISPOSE OF PERSONAL AND REAL PROPERTY, INCLUDING FRANCHISES, TRADEMARKS, PATENTS, COPYRIGHTS, LICENSES, IN THE STATE OF FLORIDA AND OTHER STATES AND COUNTRIES.

PREPARED BY: TURNER AND MELENDEZ ACCOUNTANTS, INC  
7540 US HIGHWAY ONE SUITE 103  
LANTANA, FL 33462  
TEL:(561)582-3046 FAX:(561)582-0899

### **ARTICLE III**

THE INITIAL POST OFFICE ADDRESS OF THIS ORGANIZATION IS:

**2192 NE 1<sup>ST</sup> WAY # 204  
BOYNTON BEACH, FL 33435**

PALM BEACH COUNTY, FLORIDA. THE MEMBERS, FROM TIME TO TIME, MAY MOVE THE PRINCIPLE OFFICE TO ANY OTHER ADDRESS IN FLORIDA.

### **ARTICLE IV**

CERTIFICATE DESIGNATING PLACE OF DOMICILE OR BUSINESS OF SERVICE OF PROCESS IN THE STATE OF FLORIDA AND DESIGNATION OF RESIDENT AGENT FOR SERVICE OF PROCESS.

IN PURSUANCE OF F.S. 48.091, THE FOLLOWING IS SUBMITTED IN COMPLIANCE WITH SAID ACT:

THAT DESIRING TO ORGANIZE UNDER THE LAWS OF THE STATE OF FLORIDA WITH THE FOLLOWING PERSON DESIGNATED AS AGENT TO ACCEPT SERVICE OF PROCESS NIDAL K AL SAQQA ADDRESS: 2192 NE 1<sup>ST</sup> WAY #204, BOYNTON BEACH, FL 33435.

### **ACKNOWLEDGMENT**

HAVING BEEN NAMED BY THE ABOVE CORPORATION TO ACCEPT SERVICE OF PROCESS DESIGNATED IN THE ABOVE CERTIFICATE, I HEREBY AGREE TO ACT IN SAID CAPACITY AND TO COMPLY WITH THE PROVISIONS OF KEEPING SAID OFFICE OPEN.

BY:

NIDAL K AL SAQQA

NIDAL K AL SAQQA

**ARTICLE V**

THE NAMES AND POST OFFICE ADDRESSES OF THE MANAGERS OF THIS ORGANIZATION:

NIDAL K AL SAQQA  
2192 NE 1<sup>ST</sup> WAY # 204  
BOYNTON BEACH, FL 33435

KATINA L AL SAQQA  
2192 NE 1<sup>ST</sup> WAY #204  
BOYNTON BEACH, FL 33435

**MANAGER'S SIGNATURES**

NIDAL AL SAQQA  
NIDAL K AL SAQQA

Katrina L Al Saqqa  
KATINA L AL SAQQA

2020 AUG 28 AM 10:19  
SECRETARY OF STATE  
TALLAHASSEE, FL

FILED